



Joint FMPC/BOMA Conceptual Project Workshop Application for a Planned Unit Development (PUD) Concept Plan Franklin Planning Department

Applicant Information:

This is the individual who has the responsibility of becoming familiar with the regulations, policies, and procedures of the city. This individual shall represent the applicant at all public meetings and this shall be the person responsible for the quality and accuracy of the submitted plans.

Contact Information:

The applicant shall designate one contact person to work with the Planning Department for the duration of the project including after Planning Commission approval. This shall be the person responsible for meeting any conditions of planning commission approval.

Name:	GARY VOGRIK			
	<input type="checkbox"/> On File	<input type="checkbox"/> On File	<input checked="" type="checkbox"/> Same as Applicant	
Title:	PRINCIPAL			
Organization:	LANDDESIGN			
Phone:	615-591-7164	Fax:	615-591-7180	Fax:
Email:	gvoigrin@landdesign.com			
Street:	631 SECOND AVE SOUTH			
State:	TN	ZIP:	37210	ZIP:

Project Information:

Applicant's Proposed Name of Project:	GENERALS RETREAT		Address of Property:	
Site Acreage:	±3.56	Site Square Footage:	±155,074	Map, Group, and Parcel:
				• TBK, PARCEL 9, GROUP C • TBK, PARCEL 23, GROUP C
Conceptual Overview of Project:	AMENDMENT TO EXISTING CONCEPT PLAN TO ADD 0.45 AC TO SITE & INCREASE UNIT COUNT 26 DWELLING UNITS & SUPPLEMENTAL PARKING. THE ADDITION OF UNITS TO INCLUDE 3 AFFORDABLE UNITS.			
Required Elements for Conceptual Workshop: All submittals are required to have the basic information as follows, unless otherwise noted by staff. <input checked="" type="checkbox"/> A Pre-application conference must have been held with the staff. <input checked="" type="checkbox"/> Pay Conceptual Project Workshop Fee of \$50.00 <input type="checkbox"/> Application must be completed by applicant and submitted to Project Planner by, by 5:00 p.m., 9 days prior to the meeting. <input type="checkbox"/> Provide overview of project and comments from staff per the Administrative Manual. An electronic version (PDF or PowerPoint) of the presentation that will be presented must accompany the application for proofing by staff. <input type="checkbox"/> Contact Project Planner to Set Up Neighborhood Meeting (if a required step and applicants wish to proceed)		Project Type (check all that apply): <input checked="" type="checkbox"/> PUD Concept Plan <input type="checkbox"/> Rezoning Request Also Needed <input type="checkbox"/> Annexation Also Needed <input type="checkbox"/> Land Use Plan Amendment is Needed (It's OK to have the workshop, but the Plan amendment step should occur <u>before</u> the formal application of the Concept Plan to FMPC) <input type="checkbox"/> Other: _____		Development Standard: <input type="checkbox"/> Conventional <input checked="" type="checkbox"/> Traditional
		Proposed Use(s) (check all that apply): <input type="checkbox"/> Detached Dwelling <input checked="" type="checkbox"/> Attached Dwelling (duplexes, condos, apartments, townhouses) <input type="checkbox"/> Group Homes <input type="checkbox"/> Nonresidential: <input type="checkbox"/> Retail <input type="checkbox"/> Office <input type="checkbox"/> Institutional (church, school) <input type="checkbox"/> Industrial <input type="checkbox"/> Other: _____		Character Area Overlay: CFC03
				Other Applicable Overlays: CAO COLUMBIA AVENUE OVERLAY
				Intended Workshop Date: 2/25/10
		City Project # (completed by staff):		